

2010 CCNC-N Mission Trip Registration

Gulfport, MS - March 27 to April 3, 2010 - Holy Week

Name: _____
(first, middle and last as it appears on your government-issued ID)

Name you like to be called (if different from above): _____

Address: _____

Phone: _____ Cell: _____

E-mail: _____

Congregation: _____

Date of birth: _____ (needed for the plane ticket)
(please fill this form out completely)

The cost for the week (including plane ticket, food, housing & ground transportation) is \$650.

Please have this form in to the Regional Office with a \$200 deposit **before February 28th, 2010**. If you send it in after February 28th your cost may go up due to airfare. The \$200 is refundable until a plane ticket has been purchased. Once airfare is purchased, you will be responsible to reimburse the Region the difference beyond the \$200 for the plane ticket.

Scholarship assistance is available up to \$220 per person.

_____ I am asking for a scholarship of \$ _____ from the Region.

I am receiving \$ _____ from my home church or from other gifts.

